

Vaginoplasty Revision Post-Operative Instructions

General Instructions

- Someone must drive you home from the hospital and help you at home for 1-2 days.
- Get plenty of rest.
- Follow balanced diet with high protein and fluid intake.
- Decreased activity may promote constipation, so you may want to add more raw fruit to your diet and be sure to increase fluid intake.
- Take pain medication as prescribed. Do not take aspirin or any products containing aspirin unless approved by your surgeon.
- Do not drink alcohol when taking pain medications.
- Do not smoke, as smoking delays healing and increases the risk of complications.

Activities

- Start walking as soon as possible, this helps to reduce swelling and lowers the chance of blood clots
- Do not drive until you are no longer taking any pain medications (narcotics).
- Refrain from vigorous activity for 2-6 weeks. Increase activity gradually as tolerated.
- Avoid lifting anything over 5-10 pounds for 4 weeks.
- Resume social and employment activities in about 4 weeks (if not too strenuous).

What to Expect

- Vaginal packing will be sutured in place until the follow up appointment in the office. Please leave vaginal packing place, do not cut the sutures and take the vaginal packing out on your own.
- Expect moderate drainage on your initial dressing, it is not uncommon for this to seep onto the surgical bra
- You may experience temporary soreness, bruising, swelling and tightness in the pubic area as well as discomfort in the incision area.
- Due to the location of your surgical site, slow wound healing and wound dehiscence that appears as 'raw flesh' is extremely common. This will heal with time, use bacitracin to the areas of slow healing 3 times daily.
- You may not have sensation in the pubic area, surrounding skin, or along the incisions. This usually returns with time but can take up to 12 to 18 months.
- You may have random, shooting pains and itching throughout your abdomen/back/flanks and along incisions for a few months. This is part of the normal healing process.

Dilation

- Dilate 3 times daily for 15-30 minutes each dilation session.
- Place any water-based lube or bacitracin on the tip of the dilator, insert the dilator into the vaginal opening, slowly pushing and holding the dilator deep into the vaginal pocket.
- Oozing and bleeding during dilation is very expected. It is not uncommon for small pieces of suture to come out during dilation.

- Some slow wound healing and wound dehiscence is expected with dilation. It is very common for the posterior labia majora or minor to lift up from the skin, appearing to be 'coming apart'. This will heal overtime. Continue dilation even if there appears to be slow healing.
- Dilation is an essential part of the full depth vaginoplasty procedure. If you do not dilate every day, 3 times a day for the first three months the vaginal opening will close.

Urination

• If you experience the inability to or difficulty urinating after discharge from the hospital, contact your surgeon immediately.

Incision Care

- Oozing and bleeding from the incisions and vaginal pocket is expected. This can come and go for 3 to 6 months after surgery.
- Use feminine pads/gauze to soak up bleeding. Contact your doctor if you soak through 1 or more pad every hour.
- Wash surgical incisions and vaginal pocket gently with regular shower soap and water. No vaginal douching until cleared by your surgeon.
- No tub soaking/swimming for 1 month.

Appearance

- Most of the discoloration and swelling will subside in 4-6 weeks.
- Scars may be red and angry looking for 6 months. In time, these usually soften and fade.

Follow-Up Care

- Follow up within 1 week of surgery. Expect additional follow up appointments weekly, bi-weekly, and/or monthly post op as directed by your surgeon.
- All sutures will be dissolvable.

When to Call

- If you have severe or increased pain not relieved by medication.
- If you have any side effects to medications; such as, rash, nausea, headache, vomiting.
- If you have an oral temperature over 101F degrees.
- If you have sudden increased swelling or bruising.
- If you have increased redness and/or warmth along the incision.
- If you have bleeding from the incisions that is difficult to control with light pressure.

For Medical Questions, Please contact:

- Katie Leemaster PA-C at katie@districtps.com or Dr. Praful Ramineni at doc@districtps.com
- (202) 742-3999, Monday Friday, 8 a.m. 5 p.m.

Please Email Jackie at jackie@districtps.com to set up your post op appointment for Monday/Thursday

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